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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/688,708

Filing Date 10/17/2003

First Named Inventor KENNEDY, Adam M.

Art Unit 2814

Examiner Name TRINH, Hoa B.

Attorney Docket Number 02W155

### ENCLOSURES (Check all that apply)

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached   | <input checked="" type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> After Allowance Communication to TC  |
| <input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)   | <input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences   |
| <input checked="" type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)   |
| <input type="checkbox"/> Express Abandonment Request  | <input type="checkbox"/> Request for Refund   | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Information Disclosure Statement   | <input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD  | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)   |   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1. Acknowledgement receipt postcard.<br>2. Courtesy copy in six pages of a reference previously submitted.<br>3. Duplicate PTO/SB/17 Fee Transmittal |
| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

#### Remarks

Responsive to Office Action mailed August 24, 2005.

Title: Integrated Package Design and Method for a Radiation Sensing Device

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	RAYTHEON COMPANY		
Signature	<i>William C. Schubert</i>		
Printed name	William C. Schubert		
Date	2005-11-21	Reg. No.	30,102

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>William C. Schubert</i>		
Typed or printed name	William C. Schubert	Date	2005-11-21

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NOV 23 2005

PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 120.00**Complete if Known**

Application Number	10/688,708
Filing Date	10/17/2003
First Named Inventor	KENNEDY, Adam M.
Examiner Name	TRINH, Hoa B.
Art Unit	2814
Attorney Docket No.	02W155

**METHOD OF PAYMENT** (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 500616 Deposit Account Name: Raytheon Company

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments
**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
12 - 20 or HP =	0	50	0

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
1 - 3 or HP =	0	200	0

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
100	0	0	0	0

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Fee \$120 for responding within one (1) month

<b>Fees Paid (\$)</b>
0
120

**SUBMITTED BY**

Signature	<u>William C. Schubert</u>	Registration No. (Attorney/Agent)	30,102	Telephone	805/562-2108
Name (Print/Type)	William C. Schubert	Date	2005-11-21		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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